COMMUNITY CARE LICENSING DIVISION Key Indicator Inspection Protocol Pilot Test

What?

- CCLD tested the use of the key indicator inspection protocol and evaluated three key budget assumptions:
 - o Citation outcome
 - Time per inspection
 - o Trigger to require a comprehensive inspection
- The test was applied to the six main licensing categories:
 - Residential Care Facilities for the Elderly
 - Adult Residential Facilities
 - Group Homes
 - Foster Family Homes
 - Child Care Centers
 - Family Child Care Homes

Where?

The test was statewide for each of these licensing categories.

When?

The test was conducted during the months of July, August and September 2010.

How?

- A key indicator tool was developed and used for each licensing category based upon the licensing category's citation history and program field experience.
- In addition to the key indicator tool, Licensing Program Analysts were instructed to still cite any other noncompliance that they observed even if it was not on the tool.
- The test was a comparative study between key indicator inspections and the current comprehensive inspections.
- Each month was broken up into two equal parts. The inspections made in the
 first half of the month utilized the key indicator protocol and the inspections made
 in the second half of the month used the current protocol. The Licensing
 Program Analyst had to follow this method and had no discretion to deviate.
- The test included facilities that required a random, five year, or required annual (except facilities on probation or on a non compliance plan) inspection.
- The trigger to perform a comprehensive inspection was assessed based on a
 facility having any zero tolerance violations (i.e. accessible bodies of water;
 accessible firearms; refusal to permit inspections authority; fire safety; presence
 of an excluded individual; absence of supervision) or two or more Type A
 (immediate risk) violations on the tool. Note that the test findings led to a decision
 to change this second trigger to any two Type A violations.

What it wasn't

- The test did not evaluate the frequency of inspections because of the short duration of the test.
- The test did not evaluate all outcomes.

Findings

- There were 2,731 key indicator inspections made and 1,222 comprehensive inspections made during the test period.
- Budget Assumption Citation outcomes: citation outcomes from key indicator inspections are similar to those from comprehensive inspections. The test compared the number of Type A (immediate risk) and Type B (potential risk) citations issued at a key indicator inspection to those issued based on a comprehensive inspection. The test showed that a similar number of Type A violations were issued using the key indicator inspection as during a comprehensive inspection. However, there were fewer Type B citations which is not surprising as the focus was on key health and safety indicators. This helps to support the trigger estimate in that a significant number of Type A violation are not being overlooked because of the use of the key indicators during the inspection.
- Budget Assumption Time per inspection: key indicator inspections take approximately half the time of comprehensive inspections. The time allotted to perform a full comprehensive inspection range from 2.33 hours to 5.76 hours. In the residential categories the inspections took less than half of the time on average, however, in the child care program categories it took slightly longer. The additional time savings in the residential category ranged from two minutes to 1.43 hours. The excess time used on a Child Care facility was seven minutes. The fact that Child Care facilities took slightly longer is not surprising as the time allotted for the comprehensive inspection for a child care facility is already significantly less than a residential facility because of what is inspected. Note that LPAs were directed not to try and complete the key indictor inspection in any particular amount of time but rather to use the tool without regard to time.
- Budget Assumption Trigger to require a comprehensive inspection: If a facility had any two Type A violations or a zero tolerance violation it will trigger a comprehensive inspection. Utilizing this trigger (which is a more sensitive trigger than the any two Type A from the tool) would increase the number of comprehensive inspections from the numbers used in the budget estimate from 10% to 14.06%. This preferred trigger to perform a comprehensive inspection occurred at a higher rate than the original estimate. This overage is expected to decline as a result of more frequent inspections.

Conclusion

- The pilot test helped to refine the budget estimates used in the Strengthening Health and Safety Protections proposal and will inform any future proposals.
 - o A similar number of Type A citations occurred using either protocol
 - On average the key indicator inspection takes half the time
 - The estimated percentage of triggered comprehensive inspections is slightly higher at 14.06%.
- The proposal remains general cost neutral.
- Significantly more facilities were inspected during similar periods of time which supports increased presence.
- Licensing Program Analysts were able to focus on what was most important and resulted in a more consistent inspection unbiased by the inspector.
- Because of the short duration the test could not evaluate the change in facility behavior because of more frequent inspections.
- The test could not evaluate other outcomes beyond the number of citations because of the short duration.

Recommendation

Further testing to examine the effectiveness of the tool and the process is recommended.

Next Steps

- Continue to test starting in January 2011 through the end of the fiscal year.
- Continue to keep stakeholders informed of the results.
- Propose to obtain assistance for the continued development of the process and tools from the National Association of Regulatory Administration.
- Propose to obtain the services of a university research group to develop an assessment tool that can be used to promote continuous quality improvement.